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IV. Referral, information, and recommendations made to client V. Planning/linking activities	Presenting Problems
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Source of Plans and Application

INICAL SERVICE REVIEW - INITIAL SERVICE AND ASSESSMENT -

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	nysical Disorders
II. Personality and Specific Developmental Disorders 799,90	WIXED WIXED STRONGER' BIBOTVE SOC'ET
	ychiatric Syndromes ychiatric Syndromes
Patient has had several prior hospitalizations at his seeks, blouse from Social Security cheeks that history of a toxic reaction when haldol and feets, blouse and a barrette, fine may allow a toxic reaction when haldol and feets, blouse and a barrette, her mood was situation at the patient's feet of the field in history of the left ventricilar and for the patient's electrolytes were no enlargement of the left of the field of the fi	John Peter Smith County Hospital John Peter Smith County Hospital mind, it is a channel." She had a ward dressed in the same manner. Lithium were combined in treatment hypomanic with some pressure of special atrium identified, the EKG showed a hypertrophy with a normal and in a card normal as was her CBC. Urinalysis with her internal organs were within norm normal as was her CBC. Urinalysis with her internal organs were within norm in keeping with rheumatic heart disc her internal organs were within norm her internal organs were within norm her internal organs were within norm in her treatment included the patien of 170/100 with a pulse of 80 hressure of into patient's condition at Dischal episodes of feeling faint and having alled Description of Patient's Condition at Dischal line patient was recompensated, no lead the patient was recompensated, no lead the patient was recompensated, no lead and having the patient's Condition at Dischal line patient was recompensated, no lead the patient was recompensated, no lead the patient was recompensated, no lead the patient was recompensated, no lead
shons: Patient is a 55-year-old, Caucasian female, 13ly been living at the Salvation Army in Fort Worth to on July 1, 1981 and was paying for ben board.	she receives of \$150 per mone she receives, Complic since May. She came to San Anton room at the rate of \$150 per mone she receives.
nene Stay: 28 Days	Date: August 26, 1981 Placharde Duratio

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R. D. Potterf, M.D.	
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will need continual follow up for her cardiac hospitalization was noted from the point of viel her lower extremities were greatly swollen and is condition resolved and there was no swelling	t is anticipated that the patient ondition. Improvement during her hat when she came into the hospita fiter a short course of Dyazide, th tine time of discharge.
COMM BY BEXAR SASH	To be completed whenever a standard PORS form does not provide adequate space for the required entry.

John Peter Smith Hospital Getardation Tarrant County Mental Health Mental Retardation

Discharge Summary

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5. Specific therapeutic goals and suggestions for follow-up treatment. Them designed here seems to be extremely obtached to seems to intervene in this seems. Otherhold to sen difficult to intervene in this seems in again.
3. Specific therapeutic goals and suggestions for rollow-up creatment
Follow-up care:
None
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DATE: July 31, 1981, 10:25 a.m.

found in the Medical Evaluation subsection of the Data Base.

Mames and addresses of relatives and other responsible persons are found in the Denographic Data subsection of the Data Base. Medical History is a part of the Later and the manual in the Later and the manual in the Later and t

be verified today. by the assigned social worker. Information given by patient cannot This history is limited; additional information should be obtained Texas and the patient, Betty Nelson Erma Escamilla, Secial Morker (226-2291), Salvation Army, San Antonio,

COMM BY BEXAR

DOB IS SE 1925 NETZON BELLL 068232

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PC AFW

she arrived at Salvation Army. did not know the details surrounding the incident. Patient had no medicine when abusive, threatened to strike the adults and actually struck a child. Miss Escamilla \$78.00 per month." She paid in cash. She was trying to convert people, was verbally that the "Holy Father" had sent her and had told her that she should "only pay July I and remained with them until they initiated the commitment. Patient stated PRESENTING PROBLEMS: Patient arrived from Ft. Morth at the Salvation Army around

a possible "heat stroke," and she denies mental or emotional problems. COURSE OF DYSFUNCTION: Unknown, Patient believes she was brought to SASH due to

the contract of property of the state of the died there in 1951. Patient's mother apparently owned or leased a drug store and time her father was convicted of embezzlement and later convicted of murder. She remembers very little about her father, Her father served time at Huntsville and parents were in the home when patient was a child until patient reached age II, at white following her mother's death. Causes of their deaths were not given. Both North Carolina, (second in line) who is in her 50's, has a degree in Geology. Her name is Mary Louise Smith, Her brother, (3rd sibling) died in the early 60's in the Ft. Worth area. She is the oldest of 3 siblings. She has a sister in FAMILIAL HISTORY: Patient's exact birthplace is not known. However, she grew up

Montgomery Wards, 12 years. She terminated her employment there in 1974. Patient has worked throughout adulthood. Her last place of employment was

Texas (21-years-old). Patient's husband died in 1972. married and she has one son from the union. He is Marvin Melson, 7245 Jewell, Ft. Wort out of wedlock. Her name is Roxana Rogers, 3412 Green, Ft. Worth, Texas. Patient Patient has two children. She delivered her first child (presently 29-years-old)

some time in the recent past. She stated that her son moved out of her duplex and told her that she "wasn't dying fast enough." keep in touch with her daughter or son, but stated that her son lived with her until she had a closer relationship with her mother and grandmother. She also does not communicate with her sister and has not seen her since 1977. She also does not Patient stated that she was never close to her siblings and gave the impression that

Patient attended both Baptist and Methodist churches as a child, but stated that she

is not presently a member of either denominations. She stated, "I am against

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the Data Base for more extensive information on previous treatment. Social History for historical data and to the Prior Summaries subsection of found in the Medical Evaluation subsection of the Data Base. Refer to In the Demographic Data subsection of the Data Base. Medical history is Names and addresses of relatives and other responsible persons are found

1861 '9 Isnbny :31AU

* Sexchiatric Evaluation

CHIEF COMPLAINT: "A doctor asked me to go in for an evaluation,"

memory deficit. INFORMANT: Patient herself who is considered somewhat unreliable due to

when she was taking Lithium, her left arm would shake. and then she had a toxic reaction when combined with Lithium. Patient claims that "caring is sharing " She has had a history of having been treated with Haldol Patient also verbalizes the statement over and over during the interview, statements such as, "My mind is not a mind, it is a channel, and people block my who she says she use to beat regularly with a board, Patient makes very bizarre to be placed in the hospital and has had a very stormy relationship with her son hyperreligiosity." Patient claims that frequently her daughter petitions for her latest being in 1977 for five weeks where she said she was treated "for hospitalizations at the John Peter Smith County Hospital in Fort Worth with the has been no prior hospitalization here at SASH however, the patient has several comes from a social security check that she receives for her disability. There where she pays for her room and board at the rate of \$150 per month. came to San Antonio on July 1, 1981 and has been staying at the Salvation Army currently living at the Salvation Army in Fort Worth since May. PRESENT ILLNESS: Patient is a 55-year-old, Caucasian female widowed 9/8/72,

as well as insight into her illness. The parable grass is greener was replied to by, "It won't be green if we all wear shoes and wear it out." Judgement appears to be severely impaired in this individual proverb glass houses, "We all live in glass houses and are watched by other people." Patient was not able to retain form and in doing proverbs stated her response to the response to similarity of apple and banana stating they both would have peels. autisitic replies to similes of bike and car, saying, "I would push the pedals on the tar slow," Patient also is concrete with are taking thoughts out of and putting thoughts into her mind, Patient gave very hyper-religiosity and expresses the delusion of mind control that she feels people shawl, straight hair cut in pageboy style, with rapid speech. Mood is hypomenic with appropriate affect. She is oriented times three and exhibits a decreased recent and intermediate memory recall. Patient talks in fairly loose association with MENTAL STATUS EXAM: The patient came into the interview dressed in beret, knitted

time but will be sent for. PERTINENT PSYCHIATRIC HISTORY: No recent psychiatric records are available at this

presentation is with lower extremity edema, suggestive of early cardiac failure. her diet, eats excess sait and has not been on any cardiac medications. Current does detail toxic reaction to Haldol and Lithium. Patient has not been careful about on May 5, 1980 without any improvement in hearing. Patient admits no allergies but right ear, secondary to this childhood infection, she had a right ear mastoidectony had a history of having scariet fever and had scarring and decreased hearing in the

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AXIS IV MILD PSYCHOSOCIAL STRESSORS AXIS V GOOD FUNCTIONING IN PREVIOUS YEAR	Physical Disorders LOUDECTOMY WITH HEARING LOSS TOIDECTOMY WITH HEARING LOSS THE RIGHT
II. Personality and Specific Developmental Disorders	MIXED MIXED MIXED WIXED

nal Diagnoses: p.o. q.h.s. and she was sent on discharge with her glasses prescription. systems. Medications at discharge included Navane, 5 mg. p.o. q.a.m. and 5 mg. was mildly hypomanic and was recompensated with regards to her cardiovascular etailed Description of Patient's Condition at Discharge/Furlough:

The patient was recompensated, no longer was having delusional thinking, still it episodes of feeling faint and having tachycardia which were felt to be related to anxiety. of 170/100 with a pulse of 110. Near the day of discharge, the patient had a blood pressure of 140/90 with a pulse of 80, it is noteworthy that the patient had frequent blood pressure of 150/90 with a pulse of 94, on 8/12/81 the patient had a pressure 7/29/81 she had a blood pressure of 160/84 with a pulse of 100, on 8/10/81 she had a in her treatment included the patient's having episodic elevated blood pressures, on and a prescription was given for correction of her visual acuity problems. Complications with an antiblotic including dental work, Patient also had optometry evaluation recommended that any surgery on a contaminated field should include pretreatment in keeping with rheumatic heart disease with aortic insufficiency. It was because of the patient's cardiac complications in the past and the findings were her internal organs were within normal. Internal Medicine consult was asked for revealed that she had a right oophorectomy several years ago because of ovarian cyst, reactive. A consultation was asked for the patient to be seen in OB-GYN Clinic and Patient's VDRL was non normal as was her CBC. Urinalysis was also within normal. hypertrophy with a normal sinus rate of 80. The patient's electrolytes were within atrium identified. The EKG showed a high voltage, suggestive of left ventricular were entirely normal and in a cardiac series, there were no enlargement of the left she was treated with Navane, 5 mg. b.i.d. Findings: the patient's laboratory exams hypomanic with some pressure of speech, judgement appeared to be severely impaired.
The patient's treatment on the ward for her psychiatric illness was uneventful and ward dressed in the same manner, slacks, blouse and a barrette. Her mood was slightly Patient spent almost her entire stay on the Lithium were combined in treatment. mind, it is a channel." She had a history of a toxic reaction when Haldol and patient's loss of contact with reality, making statements like "my mind is not a John Peter Smith County Hospital in Ft. Worth. This admission was precipitated by the she receives for her disability. Patient has had several prior hospitalizations at room at the rate of \$150 per month. The money comes from Social Security checks that She came to San Antonio on July 1, 1981 and was paying for her boarding Hospital Course, Findings, Procedures, Complications: Patient is a 55-year-old, Caucasian female, widowed on 9/8/72 who had previously been living at the Salvation Army in Fort Worth

Duration of Stay: _

28 Days

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To be completed by attending physician at time of discharge/furlough economy rnysician's Discharge/Furlough Note

⊠ Discharge □ Furlough

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Date: August &6,